



320541
UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

REGION 6
1445 ROSS AVENUE, SUITE 1200
DALLAS, TX 75202-2733

December 18, 2001

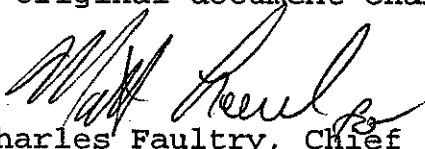
WAL MART SUPERCENTER NO 3225
702 SW 8TH STREET DEPT 8013
BENTONVILLE, AR 72716
ATTN: SCOTT ESTES, STORE MANAGER

—
This is to acknowledge that, in compliance with Section 3010 of the Resource Conservation and Recovery Act (RCRA), you have filed a Notification of Regulated Waste Activity for:

WAL MART SUPERCENTER NO 3225
2501 LAKEVIEW PARKWAY
ROWLETT, TX 75089

Your EPA Identification Number for this installation is:
TXR000046946

The EPA Identification Number must be included in all shipping manifests for transporting hazardous wastes; on all Biennial Reports that generators of hazardous wastes, and owners and operators of hazardous waste treatment, storage, and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste reports and documents required under Subtitle C of RCRA. A Subsequent Notification of Regulated Waste Activity is required should any information on the original document change.


Charles Faultry, Chief
RCRA Information Management Section

RECEIVED

NOV 14 2001

Please print or type with ELITE type (12 characters per inch) in the unshaded areas only

Form Approved OMB No. 2030-0038 Expires 12/31/02

Please refer to Section V, Line 5, Line Instructions for Completing EPA Form 8700-12 before completing this form. The information requested here is required by law (October 1990 of the Resource Conservation and Recovery Act).

Notification of Regulated Waste Activity

EPA United States Environmental Protection Agency

DEC 5 2001

I. Installation's EPA ID Number (Mark 'X' in the appropriate box)



A. Initial Notification



B. Subsequent Notification (Complete Item C)

C. Installation's EPA ID Number

TXR090046946

II. Name of Installation (Include company and specific site name)

Wal-Mart Supercenter # 3225

III. Location of Installation (Physical address not P.O. Box or Route Number)

Street

2501 LAKEVIEW PKWY

Street (Continued)

City or Town

State

Zip Code

ROWLETT

TX 75089-

County Code

County Name

113 DALLAS

IV. Installation Mailing Address (See Instructions)

Street or P.O. Box

702 S.W. 8th Street

City or Town

State

Zip Code

Bentonville

AR 72716-0555

V. Installation Contact (Person to be contacted regarding waste activities at site)

Name (Last)

First

ESTES

SCOTT

Job Title

Phone Number (Area Code and Number)

Store Manager

214-607-9839

VI. Installation Contact Address (See Instructions)

A. Contact Address (Include P.O. Box)

B. Street or P.O. Box

X

City or Town

State

Zip Code

Bentonville

AR 72716-0555

VII. Ownership (See Instructions)

A. Name of Installation's Legal Owner

Wal-Mart Stores TEXAS, LP

B. Street, P.O. Box, or Route Number

702 S.W. 8th Street

City or Town

State

Zip Code

Bentonville

AR 72716-0555

C. Phone Number (Area Code and Number)

501-273-8715

D. Land Type

P

E. Owner Type

P

F. Change of Owner Indicator

X

G. Date Changed

Month Day Year

12-6-01
11/29/01

ID - For Official Use Only

VII. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to instructions).

A. Hazardous Waste Activities

1. Generator (See instructions)
☐ a. Greater than 1000 kg/mo (2,200 lbs.)
☐ b. 100 to 1000 kg/mo (220-2,200 lbs.)
☒ c. Less than 100 kg/mo (220 lbs.)
 2. Transporter (Indicate Mode in Boxes
 a-b below)
☐ a. For own waste only
☐ b. For commercial purposes
 Mode of Transportation:
☐ 1. Air
☐ 2. Rail
☐ 3. Highway
☐ 4. Water
☐ 5. Other Specify _____
☐ 3.reater, Storer, Disposer (at
 Installation) Note: A permit is
 required for this activity; see
 instructions.
☐ a. Exempt Boiler and/or Industrial
 Furnace
☐ b. Smelting, Milling, and Refin-
 ing Furnace Exemption
☐ c. Small Quantity On-Site Burner
 Exemption
☐ 4. Underground Injection Control

C. Used Oil Management Activities

1. Used Oil Transporter/Transfer
 Facility: Indicate Type(s) of
 Activity(ies)
☐ a. Transporter
☐ b. Transfer Facility
 2. Used Oil Processor/Refiner:
 Indicate Type(s) of Activity(ies)
☐ a. Processor
☐ b. Refiner
☐ 3. Off-Specification Used Oil Burner
☐ 4. Used Oil Fuel Burner
☐ a. Markers Who Direct Shipment
 of Off-Specification Used Oils
 Used Oil Burner
☐ b. Markers Who Find Claims the
 Used Oil Meets the
 Specifications

B. Universal Waste Activities

- ☐ Large Quantity Handler of Universal Waste

IX. Description of Hazardous Wastes (Use additional sheets if necessary)

A. Listed Hazardous Wastes: (See 40 CFR 261.31-33. See instructions if you need to list more than 12 waste codes.)

1 D 0 0 1	2 D 0 0 2	3 D 0 0 8	4 D 0 1 1	5	6
7	8	9	10	11	12

B. Characteristics of Nonlisted Hazardous Wastes: (Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. See 40 CFR Parts 261.20-261.24. See instructions if you need to list more than 4 toxicity characteristics waste codes.)

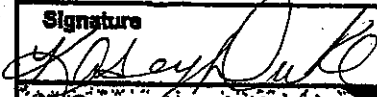
1 Corrosive (D001)	2 Extremely Flammable (D002)	3 Flammable (D003)	4 Toxic (D004)	5 Reactive (D005)	6 Hazardous to the Environment (D006)
X	X				

C. Other Wastes: (State regulated or other wastes requiring a handler to have an ID number. See instructions.)

1	2	3	4	5	6

X. Certification

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature 	Name and Official Title (Type or print) Kasey Duke - License Coordinator	Date Signed 11-6-01
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30 Comments:

Note: Mail completed form to the appropriate EPA Regional or State Office. (See Section IV of the booklet for addresses.)

HOME DEPOT NO 8951
1905 ASTON AVENUE STE 100
CARLSBAD, CA 92008
ATTN: ROBERT PERKINS



**ACKNOWLEDGMENT OF RCRA SUBTITLE C
SITE IDENTIFICATION FORM**

This is to acknowledge that you have filed a RCRA Subtitle C Site Identification Form for the facility located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that facility appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage, and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and on other hazardous waste management reports and documents required under Subtitle C of RCRA. A Subsequent RCRA Subtitle C Site Identification Form is required should any information on the original document change.

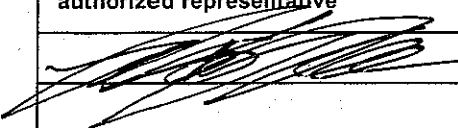
EPA I.D.Number: **TXR000059758**

Facility Name and Address: **HOME DEPOT NO 8951
2201 LAKEVIEW PARKWAY
ROWLETT, TX 75088**

August 8, 2005

SEND COMPLETED FORM TO: The Appropriate State or EPA Regional Office.	United States Environmental Protection Agency RCRA SUBTITLE C SITE IDENTIFICATION FORM		RECEIVED JUL 14 2005												
1. Reason for Submittal (See instructions on page 13.) MARK ALL BOX(ES) THAT APPLY	Reason for Submittal: 6PD-O <input type="checkbox"/> To provide Initial Notification of Regulated Waste Activity (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities) <input checked="" type="checkbox"/> To provide Subsequent Notification of Regulated Waste Activity (to update site identification information) <input type="checkbox"/> As a component of a First RCRA Hazardous Waste Part A Permit Application <input type="checkbox"/> As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment # _____) <input type="checkbox"/> As a component of the Hazardous Waste Report														
2. Site EPA ID Number (page 14)	EPA ID Number <u>TXR000059758</u>														
3. Site Name (page 14)	Name: HOME DEPOT USA, INC. HD 8951														
4. Site Location Information (page 14)	Street Address: 2201 LAKEVIEW PARKWAY City, Town, or Village: ROWLETT State: TX County Name: DALLAS Zip Code: 75088														
5. Site Land Type (page 14)	Site Land Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other														
6. North American Industry Classification System (NAICS) Code(s) for the Site (page 14)	<table border="1"> <tr> <td data-bbox="370 1087 873 1182">A. 444110</td> <td data-bbox="873 1087 1453 1182">B.</td> </tr> <tr> <td data-bbox="370 1182 873 1287">C.</td> <td data-bbox="873 1182 1453 1287">D.</td> </tr> </table>			A. 444110	B.	C.	D.								
A. 444110	B.														
C.	D.														
7. Site Mailing Address (page 15)	Street or P. O. Box: 1905 Aston Ave. Ste. 100 City, Town, or Village: Carlsbad State: CA Country: <u>San Diego</u> Zip Code: 92008														
8. Site Contact Person (page 15)	<table border="1"> <tr> <td data-bbox="370 1507 873 1560">First Name: Robert</td> <td data-bbox="873 1507 1003 1560">MI:</td> <td data-bbox="1003 1507 1453 1560">Last Name: Perkins</td> </tr> <tr> <td colspan="2" data-bbox="370 1560 1003 1612">Phone Number: 760-602-8700 Extension:</td> <td data-bbox="1003 1560 1453 1612">Email address: rperkins@3ecompany.com</td> </tr> </table>			First Name: Robert	MI:	Last Name: Perkins	Phone Number: 760-602-8700 Extension:		Email address: rperkins@3ecompany.com						
First Name: Robert	MI:	Last Name: Perkins													
Phone Number: 760-602-8700 Extension:		Email address: rperkins@3ecompany.com													
9. Operator and Legal Owner of the Site (pages 15 and 16)	<table border="1"> <tr> <td colspan="2" data-bbox="370 1623 1003 1696">A. Name of Site's Operator: Home Depot USA</td> <td data-bbox="1003 1623 1453 1696">Date Became Operator (mm/dd/yyyy): 7/29/04</td> </tr> <tr> <td colspan="3" data-bbox="370 1696 1453 1770">Operator Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other</td> </tr> <tr> <td colspan="2" data-bbox="370 1770 1003 1843">B. Name of Site's Legal Owner: Home Depot USA</td> <td data-bbox="1003 1770 1453 1843">Date Became Owner (mm/dd/yyyy): 7/29/2004</td> </tr> <tr> <td colspan="3" data-bbox="370 1843 1453 1917">Owner Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other</td> </tr> </table>			A. Name of Site's Operator: Home Depot USA		Date Became Operator (mm/dd/yyyy): 7/29/04	Operator Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other			B. Name of Site's Legal Owner: Home Depot USA		Date Became Owner (mm/dd/yyyy): 7/29/2004	Owner Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other		
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Owner Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other															

EPA Form 8700-12 (Revised 1/2004)

I 1. Description of Hazardous Wastes (See instructions on page 20.)						
A. Waste Codes for Federally Regulated Hazardous Wastes. Please list the waste codes of the Federal hazardous wastes handled at your site. List them in the order they are presented in the regulations (e.g., D001, D003, F007, UI 12). Use an additional page if more spaces are needed.						
D001	D016	F003				
D002	D018	F005				
D009	D035					
B. Waste Codes for State-Regulated (i.e., non-Federal) Hazardous Wastes. Please list the waste codes of the State-regulated hazardous wastes handled at your site. List them in the order they are presented in the regulations. Use an additional page if more spaces are needed for waste codes.						
12. Comments (See instructions on page 20.)						
<div>LUUUI</div>						
13. Certification. I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. (See instructions on page 20.)						
Signature of operator, owner, or an authorized representative	Name and Official Title (type or print)				Date Signed (mmVdd/yyyy)	
	Robert Perkins				6/18/05	

H21Rd/67

HOME DEPOT NO 8951
1905 ASTON AVENUE NO 100
CARLSBAD, CA 92008
ATTN: ROBERT PERKINS



**ACKNOWLEDGMENT OF RCRA SUBTITLE C
SITE IDENTIFICATION FORM**

This is to acknowledge that you have filed a RCRA Subtitle C Site Identification Form for the facility located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that facility appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage, and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and on other hazardous waste management reports and documents required under Subtitle C of RCRA. A Subsequent RCRA Subtitle C Site Identification Form is required should any information on the original document change.

EPA I.D.Number: **TXR000059758**

Facility Name and Address: **HOME DEPOT NO 8951
2201 LAKEVIEW PARKWAY
ROWLETT, TX 75088**

October 4, 2004

SEND COMPLETED FORM TO: The Appropriate State or EPA Regional Office.	United States Environmental Protection Agency RCRA SUBTITLE C SITE IDENTIFICATION FORM		RECEIVED SEP 20 2004 6PD-O
1. Reason for Submittal (See instructions on page 13.) MARK ALL BOX(ES) THAT APPLY	Reason for Submittal: <input checked="" type="checkbox"/> To provide Initial Notification of Regulated Waste Activity (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities) <input type="checkbox"/> To provide Subsequent Notification of Regulated Waste Activity (to update site identification information) <input type="checkbox"/> As a component of a First RCRA Hazardous Waste Part A Permit Application <input type="checkbox"/> As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment # _____) <input type="checkbox"/> As a component of the Hazardous Waste Report		
2. Site EPA ID Number (page 14)	EPA ID Number TXR000059758		
3. Site Name (page 14)	Name: Home Depot # 8951		
4. Site Location Information (page 14)	Street Address: 2201 Lakeview Pkwy		
	City, Town, or Village: Rowlett	State: TX	
	County Name: Dallas	Zip Code: 75089	
5. Site Land Type (page 14)	Site Land Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other		
6. North American Industry Classification System (NAICS) Code(s) for the Site (page 14)	A. 444110	B.	
	C.	D.	
7. Site Mailing Address (page 15)	Street or P. O. Box: 1905 Aston Ave #100		
	City, Town, or Village: Carlsbad		
	State: CA		
	Country: USA		Zip Code: 92008
8. Site Contact Person (page 15)	First Name: Robert	MI:	Last Name: Perkins
	Phone Number: 760.602.8839 Extension: —		Email address: Rperkins@3ecompany.com
9. Operator and Legal Owner of the Site (pages 15 and 16) Received AUG 09 2004 Registration and Reporting Section	A. Name of Site's Operator: Home Depot USA		Date Became Operator (mm/dd/yyyy): 10/14/2004
	Operator Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other		
	B. Name of Site's Legal Owner: Home Depot USA		Date Became Owner (mm/dd/yyyy): 10/14/2004
	Owner Type: <input type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other		

9. Legal Owner (Continued) Address	Street or P. O. Box: <u>2455 Paces Ferry Rd D-17</u>	
	City, Town, or Village: <u>Atlanta</u>	
	State: <u>GA</u>	
	Country: <u>USA</u>	Zip Code: <u>30339</u>

10. Type of Regulated Waste Activity

Mark "Yes" or "No" for all activities; complete any additional boxes as instructed. (See instructions on pages 16 to 20.)

A. Hazardous Waste Activities

Complete all parts for 1 through 6.

☒ Y ☐ N ☐ 1. Generator of Hazardous Waste

If "Yes", choose only one of the following - a, b, or c.

☐ a. LQG: Greater than 1,000 kg/mo (2,200 lbs./mo.)
of non-acute hazardous waste; or☐ b. SQG: 100 to 1,000 kg/mo (220 - 2,200 lbs./mo.)
of non-acute hazardous waste; or☒ c. CESQG: Less than 100 kg/mo (220 lbs./mo.)
of non-acute hazardous waste

In addition, indicate other generator activities.

☐ d. United States Importer of Hazardous Waste☐ e. Mixed Waste (hazardous and radioactive) Generator**☐ Y ☒ N ☐ 2. Transporter of Hazardous Waste****☐ Y ☒ N ☐ 3. Treater, Storer, or Disposer of****Hazardous Waste (at your site) Note:**A hazardous waste permit is required for
this activity.**☐ Y ☒ N ☐ 4. Recycler of Hazardous Waste (at your
site)****☐ Y ☒ N ☐ 5. Exempt Boiler and/or Industrial
Furnace**

If "Yes", mark each that applies.

☐ a. Small Quantity On-site Burner
Exemption☐ b. Smelting, Melting, and Refining
Furnace Exemption**☐ Y ☒ N ☐ 6. Underground Injection Control****B. Universal Waste Activities****☐ Y ☒ N ☐ 1. Large Quantity Handler of Universal Waste (accumulate
5,000 kg or more) [refer to your State regulations to
determine what is regulated]. Indicate types of universal
waste generated and/or accumulated at your site. If "Yes",
mark all boxes that apply:**

	<u>Generate</u>	<u>Accumulate</u>
a. Batteries	<input type="checkbox"/>	<input type="checkbox"/>
b. Pesticides	<input type="checkbox"/>	<input type="checkbox"/>
c. Thermostats	<input type="checkbox"/>	<input type="checkbox"/>
d. Lamps	<input type="checkbox"/>	<input type="checkbox"/>
e. Other (specify) _____	<input type="checkbox"/>	<input type="checkbox"/>
f. Other (specify) _____	<input type="checkbox"/>	<input type="checkbox"/>
g. Other (specify) _____	<input type="checkbox"/>	<input type="checkbox"/>

☐ Y ☒ N ☐ 2. Destination Facility for Universal Waste

Note: A hazardous waste permit may be required for this activity.

C. Used Oil Activities

Mark all boxes that apply.

☐ Y ☒ N ☐ 1. Used Oil Transporter

If "Yes", mark each that applies.

☐ a. Transporter☐ b. Transfer Facility**☐ Y ☒ N ☐ 2. Used Oil Processor and/or Re-refiner**

If "Yes", mark each that applies.

☐ a. Processor☐ b. Re-refiner**☐ Y ☒ N ☐ 3. Off-Specification Used Oil Burner****☐ Y ☒ N ☐ 4. Used Oil Fuel Marketer**

If "Yes", mark each that applies.

☐ a. Marketer Who Directs Shipment of
Off-Specification Used Oil to
Off-Specification Used Oil Burner☐ b. Marketer Who First Claims the
Used Oil Meets the Specifications

11. Description of Hazardous Wastes (See instructions on page 20.)

A. Waste Codes for Federally Regulated Hazardous Wastes. Please list the waste codes of the Federal hazardous wastes handled at your site. List them in the order they are presented in the regulations (e.g., D001, D003, F007, U112). Use an additional page if more spaces are needed.

D001	D016					
D002	D018					
D009						

B. Waste Codes for State-Regulated (i.e., non-Federal) Hazardous Wastes. Please list the waste codes of the State-regulated hazardous wastes handled at your site. List them in the order they are presented in the regulations. Use an additional page if more spaces are needed for waste codes.

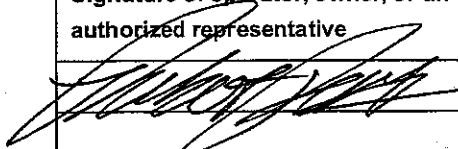
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Signature of operator, owner, or an authorized representative

Name and Official Title (type or print)

Date Signed
(mm/dd/yyyy)

	Robert Perkins specialist	7/12/09